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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. OSTEOONICS 3.0-349
		First Inventor Andreas W. Speitling
		Title A DEVICE FOR USE WITH THERAPEUTIC, etc. ^o
		Express Mail Label No. L-EV011144155US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status
See 37 CFR 1.27.
3. Specification [Total Pages **11**] (preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Priority (if applicable)
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure

4. Drawing(s) (35 U.S.C. 113) [Total Sheets]
5. Oath or Declaration [Total Pages]

- a. Newly executed (original or copy)
- b. Copy from a prior application (37 CFR 1.63(d))
(for continuations/divisionals with Box 18 completed)
- l. DELETION OF INVENTOR(S)
Signed statement attached claiming inventor(s) named in the prior application,
see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label			<input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	Raymond W. Augustin	Registration No. (Attorney/Agent)	28,588
Signature			Date December 3, 2001

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Application claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) **794.00**

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other <input type="checkbox"/> None
<input checked="" type="checkbox"/> Deposit Account			
Deposit Account Number:	12-1095		
Deposit Account Name:	Lerner, David, Littenberg, Krumholz & Meltlik, LLP		
The Commissioner is hereby authorized to: (check all that apply)			
<input type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments		
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application			
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account			

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	740.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)		(\$)	740.00		

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	23	-20** =	3	x	19.00	=	\$4.00	Fee Paid
Independent Claims	3	-3** =		x		=	0.00	
Multiple Dependent								

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
103	18	203	9
102	84	202	42
104	280	204	140
109	84	209	42
110	18	210	9
SUBTOTAL (2)		(\$)	54.00

** or number previously paid, if greater. For Reissues, see above.

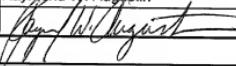
3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	206	85
127	50	227	25
139	130	139	130
147	2,620	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
116	110	215	55
116	400	216	200
117	920	217	460
118	1,440	218	720
126	1,960	228	980
119	320	219	160
120	320	220	160
121	260	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	460	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
149	740	249	370
179	740	279	370
169	900	169	900
Other fee (specify)			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) **0.00**

Complete if Known

Name (Print/Type)	Raymond W. Augustin	Registration No. (Attorney/Agent)	28,588	Telephone	(908) 518-6318
Signature				Date	December 3, 2001

Express Mail Label No. EV 011144155 US Dated: December 3, 2001